

	Permit #	
APN#_		

CITY OF MESQUITE WALL / FENCE INSTALLATION APPLICATION

{For inspections, phone 346-6156}

Street Address of Jo	b Site:			Zip Code: 8902	
Owner:			Ph	one Number: ()	
Owner's Address:			Dh	one Number: _()	
Contractor's Mailing A	ddress:		гп	one Number. ()	
Contractor's Nevada	State License #	Clas	ss Mesquite C	City Business License #	
Subdivision/Project				Phase # Lot #	
PLANS: □ A	Attached to Permit	☐ Plans on File #		City Standards (non-retaining)	
1. Lineal Feet:	Height:	=	Sq. Feet:		
Lineal Feet: Lineal Feet:	Height:	=	Sq. Feet:		
3. Lineal Feet:	Height:	=	Sq. Feet:		
4. Lineal Feet:	Height:	=	Sq. Feet:		
		☐ Trash Enclosure	(City Standards)	☐ Concrete Retaining Wall	
Description of Work	<u> </u>				
(Permit covers only the wor Mesquite and to call this De				fications of the Building Code of the City	of
This permit is being is	sued subject to the	following:			
	IMPORT	ΔNT-PI FΔSF RI	EAD BEFORE SIG	NING	
Wall and Fence Ackno		ANTI LEAGE KI	LAD BEI OILE OIG	111110	
fence. I understand and the safe flow of any water requirements, the retain I certify that I have read	d agree that should the er course, this permit ing wall, block wall or this application and state laws relating to	e City of Mesquite determile be rendered invalid fence may be abated, tate that the above inforbuilding construction, a	rmine that this retaining w immediately. I further ag removed or altered at my rmation is correct. I agre	proposed retaining wall, block wall vall, block wall or fence be detriment tree that I fail to adhere to the above expense. e to comply with all city and county esentatives of this city to enter upon	al to
Contractor Signature	a:			Date:	
I hereby certify that the info permit with the City of Meso	rmation provided on this quite. I also certify that all	Subcontractors working o		and correct and request the issuance of hin the City of Mesquite and the State of	a
		For Office	Use Only		
				VALUATION: \$	
				Permit Fee:	
				Plan Check Fee:	
				Admin Fee:	
				Total Due:	
				Submittal Fee:	
				Check #	
Issued By:				Balance Due:	
	ite Building Department			Check #	
Date of Issuance:					_



INSPECTION RECORD

For inspections, phone 346-6156

Required Inspections	Inspection Date	City Inspector
COMPACTION REPORT IS REQUIRED AT		
JOB SITE ON FOOTINGS INSPECTION		
Footings (steel placement)		
Footings (if)		
Footings (if)		
Footings (if)		
Pre-pour (steel placement)		
Pre-pour (if)		
Pre-pour (if)		
Pre-pour (if)		
4' Lift/Grouting		
Lift/Grouting (if)		
Lift/Grouting (if)		
Lift/Grouting (if)		
Top-off/Grouting		
Top-off/Grouting (if)		
Top-off/Grouting (if)		
Top-off/Grouting (if)		
Other:		
Other:		
Final/Trash Enclosure (only)		



WALL/FENCE PLAN REVIEW SUBMITTAL

	Contractor/Applicant
SIGNATUR	
Peri	mit application completed with a submittal fee of \$40.00
	wner building wall, Owner Affidavit must be signed lavit to be obtained at Building Department)
Eng	ineered concrete design on retaining walls
	uilding the wall on the property line, all property owners affected by the wall st submit a Wall Authorization signed and notarized at the time of submittal
	opy of the standards for Clark County design (either standard or retaining) ched to the permit
	te Plans showing location of any buildings and walls with the length of wall cated – separate identification of retaining from non-retaining locations